FEC FORM 1

STATEMENT OF ORGANIZATION

FORM 1	ORGANIZATION	
i Oitiii i	(See instructions)	Office use only
NAME OF COMMITTEE (in	full) (Check if name Example: If typying, type over the lines	12FE4M5
Business Soft	ware Alliance PAC	
ADDRESS (number and	street) 1150 18th Street NW Suite 700	
(Check if address is changed)		
	Washington	DC 20036 - 111
	CITY▲	STATE▲ ZIP CODE ▲
COMMITTEE'S E-MA	IL ADDRESS (Please provide only one e-mail address)	
(Check if address is changed)	johnh@bsa.org	
COMMITTEE'S WEB	PAGE ADDRESS (URL)	
(Check if address is changed)	n/a	
	'	
2. DATE 0.3		
3. FEC IDENTIFICA	TION NUMBER C C00416685	
4. IS THIS STATEM	MENT NEW (N) OR X AMENDED (A)	
I certify that I have exam	ned this Statement and to the best of my knowledge and belief it is true, correct an	nd complete
Type or Print Name of	Treasurer Robert W Holleyman II	
Signature of Treasure	Electronically Filed by Robert W Holleyman II	Date 03 / 23 / 2009
NOTE: Submission of fa	lse, erroneous, or incomplete information may subject the person signing this State ANY CHANGE IN INFORMATION SHOULD BE REPORTED	•
Office	For further information	contact
Use	For further information Federal Election Commis Toll Free 800-424-9530	